		ation to identify your c								
	btor 1	Christine Ma	rie Pompei			_				
	btor 2 buse, if filing)					_				
Uni	ited States Ba	nkruptcy Court for the	: MIDDLE DISTRICT O	F PENNSYLVANIA						
_	se number	1:24-BK-00746-H	IWV	_			Check if this is:			
(If kn	nown)						An amended filing			
							A suppleme	nt showing po as of the follow		hapter
0	fficial Fo	<u>rm 106l</u>					MM / DD/ Y	YYY		
S	chedule	: I: Your Inc	ome							12/15
spo atta	use. If you are	e separated and you	are married and not fili Ir spouse is not filing wi On the top of any additi	ith you, do not inclu	de infor	mation	about your spo	use. If more s	space is ne	eeded,
1.	Fill in your information	employment		Debtor 1			Debtor 2	or non-filing	spouse	
		more than one job,	Francisco and adatus	■ Employed			☐ Emplo	yed		
		eparate page with n about additional	Employment status Occupation	☐ Not employed			☐ Not er	☐ Not employed		
		time, seasonal, or	Собиранон	Machaniachura /	Vron Co	hool				
	self-employe	ed work.	Employer's name	Mechanicsburg Area School District						
		may include student ker, if it applies.	Employer's address							
			How long employed t	here?						
Par	rt 2: Giv	e Details About Mor	nthly Income							
spou	use unless you	are separated.	ate you file this form. If	,		•		•	•	J
		filing spouse have mo h a separate sheet to	ore than one employer, co this form.	ombine the information	n for all	employ	ers for that perso	n on the lines	below. If yo	ou need
						F	or Debtor 1	For Debtor non-filing s		
2.			ry, and commissions (bocalculate what the month)		2.	\$_	1,284.14	\$	N/A	
3.	Estimate ar	nd list monthly overt	ime pay.		3.	+\$_	0.00	+\$	N/A	
4.	Calculate g	ross Income. Add lin	ne 2 + line 3.		4.	\$_	1,284.14	\$	N/A	

				For	Debtor 1	For Debtor 2 or non-filing spouse	
	Сору	r line 4 here	4.	\$	1,284.14	\$	N/A
5.	List a	all payroll deductions:					
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	208.87	\$	N/A
	5b.	Mandatory contributions for retirement plans	5b.	\$_	0.00	\$	N/A
	5c.	Voluntary contributions for retirement plans	5c.	\$_	89.03	\$-	N/A
	5d.	Required repayments of retirement fund loans	5d.	\$_	0.00	<u>\$</u> —	N/A
	5e.	Insurance	5e.	\$_	0.00	\$_	N/A
	5f.	Domestic support obligations	5f.	\$_	0.00	<u>\$</u> —	N/A
	5g.	Union dues	5g.	\$-	0.00	\$_	N/A
	5h.	Other deductions. Specify:	5h.+	\$_	0.00	· —	N/A
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	297.90	\$	N/A
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	986.24	\$	N/A
8.	List a 8a.	All other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	N/A
	8b.	Interest and dividends	8b.	\$-	0.00	\$_	N/A
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive		Ψ	0.00	~	IWA
		Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	N/A
	8d.	Unemployment compensation	8d.	\$-	0.00	Ψ_	N/A
	8e.	Social Security	8e.	\$ _	2,676.90	\$ 	N/A
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:		\$	0.00	\$	N/A
	8g.	Pension or retirement income	8g.	\$	2,232.98	\$	N/A
	8h.	Other monthly income. Specify:	8h.+	\$	0.00	\$	N/A
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	4,909.88	\$	N/A
10.		ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		5,896.12 + \$_		N/A = \$5,896.12
11.	Includ other	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not ify:	depend				Schedule J. 11. +\$ 0.00
12.		the amount in the last column of line 10 to the amount in line 11. The resethat amount on the Summary of Schedules and Statistical Summary of Certaines					12. \$ 5,896.12 Combined
13.	Do y	ou expect an increase or decrease within the year after you file this form	?				monthly income
		No. Yes Explain:					

Official Form 106I Schedule I: Your Income page 2 Case 1:24-bk-00746-HWV Doc 25 Filed 08/02/24 Entered 08/02/24 12:45:32 Desc

Fill i	n this informa	tion to identify y	our case:					
Debt	or 1	Christine Ma	rie Pompe	ei		Ch	eck if this is:	
			· ·				An amended filing	
Debt	or 2					П	A supplement sho	wing postpetition chapter
(Spo	use, if filing)					_	13 expenses as of	the following date:
Unite	ed States Bankr	uptcy Court for the	: MIDDL		MM / DD / YYYY			
Case	e number 1:	24-BK-00746-	HWV					
	nown)	21 51 007 10	11000					
	ficial Ea	rm 106J				1		
		J: Your	Exper	nses				12/1
Be a	as complete a	and accurate as	s possible eded, atta	. If two married people ar				
Part 1.	1: Descr Is this a joir	ribe Your House nt case?	ehold					
	■ No. Go to		in a separ	ate household?				
	□и	0	•	ial Form 106J-2, <i>Expenses</i>	for Separate House	ehold of De	ebtor 2.	
2.		e dependents?		,	•			
	Do not list D	•	☐ Yes.	Fill out this information for	Dependent's relat	ionship to	Dependent's	Does dependent
	Debtor 2.		— 103.	each dependent	Debtor 1 or Debto		age	live with you?
	Do not state	the						□ No
	dependents	names.						☐ Yes
								□ No
								☐ Yes
								☐ No
								☐ Yes
								□ No
					-			☐ Yes
3.	expenses o	oenses include f people other t d your depende	than 👝	No Yes				
Part		ate Your Ongoi		ly Fynansas				
Esti	mate your ex	penses as of y	our bankr	uptcy filing date unless y y is filed. If this is a supp	ou are using this f	orm as a	supplement in a Ch	apter 13 case to report
	licable date.	d date after the	Dankrupio	y is illed. Il tills is a supp	nemental Schedule	, check	the box at the top t	of the form and the mitthe
the		h assistance an		government assistance in cluded it on <i>Schedule I:</i>)			Your exp	penses
		,				_		
4.		or home owners and any rent for th		nses for your residence. In or lot.	nclude first mortgag	e 4.	\$	350.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a.	\$	265.00
	4b. Prope	rty, homeowner'	s, or renter	's insurance		4b.	\$	100.00
	4c. Home	maintenance, re	epair, and i	upkeep expenses		4c.	\$	50.00
		owner's associa				4d.	\$	45.00
5	Additional r	nortanaa navm	anta far w	our residence such as ho	ma aquitu laana	5	¢.	0.00

Official Form 106J Schedule J: Your Expenses page 1

Deb	tor 1 Christine Marie Pompei	Case number (if known)	1:24-BK-00746-HWV
6.	Utilities:		
٥.	6a. Electricity, heat, natural gas	6a. \$	260.00
	6b. Water, sewer, garbage collection	6b. \$	91.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	321.00
	6d. Other. Specify:	6d. \$	0.00
7.	Food and housekeeping supplies	7. \$	775.00
8.	Childcare and children's education costs	8. \$	0.00
9.	Clothing, laundry, and dry cleaning	9. \$	90.00
	Personal care products and services	10. \$	100.00
11.	Medical and dental expenses	11. \$	250.00
12.	Transportation. Include gas, maintenance, bus or train fare.	• —	
	Do not include car payments.	12. \$	510.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$	110.00
14.	Charitable contributions and religious donations	14. \$	100.00
15.	Insurance.		
	Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a. \$	0.00
	15b. Health insurance	15b. \$	199.00
	15c. Vehicle insurance	15c. \$	267.00
	15d. Other insurance. Specify:	15d. \$	0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: Federal tax withheld from pension	16. \$	103.00
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1	17a. \$	445.00
	17b. Car payments for Vehicle 2	17b. \$	0.00
	17c. Other. Specify:	17c. \$	0.00
	17d. Other. Specify:	17d. \$	0.00
18.	Your payments of alimony, maintenance, and support that you did not report as		0.00
10	deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18. \$ 	
19.	Other payments you make to support others who do not live with you.	·	0.00
20	Specify: Other real property expenses not included in lines 4 or 5 of this form or on <i>Sch</i>	19.	
20.	20a. Mortgages on other property	20a. \$	0.00
	20b. Real estate taxes	20b. \$	0.00
	20c. Property, homeowner's, or renter's insurance	20c. \$	0.00
	20d. Maintenance, repair, and upkeep expenses	20d. \$	0.00
	20e. Homeowner's association or condominium dues	20d. \$	
24		20e. \$ 21. +\$	0.00
21.	Other: Specify:	Z1. + \$	0.00
22.	Calculate your monthly expenses		
	22a. Add lines 4 through 21.	\$	4,431.00
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	\$,
	22c. Add line 22a and 22b. The result is your monthly expenses.	\$ 	4,431.00
	, , , ,	<u> </u>	1,101.00
23.	Calculate your monthly net income.		
	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	5,896.12
	23b. Copy your monthly expenses from line 22c above.	23b\$	4,431.00
	23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c. \$	1,465.12
24.	Do you expect an increase or decrease in your expenses within the year after y For example, do you expect to finish paying for your car loan within the year or do you expect you modification to the terms of your mortgage? No.		crease or decrease because of a
	☐ Yes. Explain here:		
	□ 165. Explain note.		